

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision
effective 01/01/15 New and 01/15/15 Renewal.

| | (1) | (2) | (3) |
|-----|--|---------------------------------------|-----------------------------|
| | Coverage | Annual Premium Volume (Illinois) * | Percent Change (+or-) ** |
| 1. | Automobile Liability Private Passenger | | |
| | Commercial | | |
| 2. | Automobile Physical Damag Private Passenger | | |
| | Commercial | | |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | | |
| 10. | Extended Coverage | | |
| 11. | Inland Marine | | |
| 12. | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Other Package | \$114,333 | 2.80% |

Line of Insurance

Does filing only apply to certain territory (territories) or certain
Classes? If so,
specify: No

Brief description of filing. (If filing follows rates of an advisory
Organization, specify
organization): Updating our Commercial Auto PMFs to coordinate with the
Commercial Auto revision.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new
rates.

Acadia Insurance Company

Name of Company

John Thelen - Vice President, Secretary

Official - Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision
effective 04/01/2015.

| | (1) Coverage | (2) Annual Premium Volume (Illinois) * | (3) Percent Change (+or-) ** |
|-----|--|--|------------------------------------|
| 1. | Automobile Liability Private Passenger | | |
| | Commercial | | |
| 2. | Automobile Physical Damag Private Passenger | | |
| | Commercial | | |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | | |
| 10. | Extended Coverage | | |
| 11. | Inland Marine | | |
| 12. | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Other General Liability | \$6,432,130 | -12% |
| | Life of Insurance | | |

Does filing only apply to certain territory (territories) or certain
Classes? If so,
specify: N/A

Brief description of filing. (If filing follows rates of an advisory
Organization, specify
organization):

Arch Insurance Company, a member of Insurance Services Office (ISO)
is filing to adopt the ISO Commercial General Liability rule revision as contained in Reference Number GL-2014-IALL1.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new
rates.

Arch Insurance Company

Name of Company

Carol Kennedy, Vice President - Compliance

Official - Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 07/15/2015

| (1) <u>Coverage</u> | (2) <u>Annual Premium Volume (Illinois)*</u> | (3) <u>Percent Change (+ or -)**</u> |
|---|---|---|
| 1. Automobile Liability Private Passenger Commercial | | |
| 2. Automobile Physical Damage Private Passenger Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other <u>CINCIPAK</u> Line of Insurance | <u>\$169,046</u> | <u>11.096%</u> |

Does filing only apply to certain territory (territories) or certain classes? If so, specify: Filing contains changes for all territories and most classes.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Revisions have been made to our existing Conversion Factors. We feel that we have achieved a rate level that is not excessive, inadequate or unfairly discriminatory. The overall net effect of these changes is an increase of 11.096%.

This information is exact.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

The Cincinnati Casualty Company - FEIN 31-0826946

Name of Company

Kelly Lindemuth, AINS, AIS, Filings Analyst III

Official - Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 07/15/2015

| (1) <u>Coverage</u> | (2) <u>Annual Premium Volume (Illinois)*</u> | (3) <u>Percent Change (+ or -)**</u> |
|---|---|---|
| 1. Automobile Liability Private Passenger Commercial | | |
| 2. Automobile Physical Damage Private Passenger Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other <u>CINCIPAK</u> Line of Insurance | \$184,085 | 9.628% |

Does filing only apply to certain territory (territories) or certain classes? If so, specify: Filing contains changes for all territories and most classes.._____

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Revisions have been made to our existing Conversion Factors. We feel that we have achieved a rate level that is not excessive, inadequate or unfairly discriminatory. The overall net effect of these changes is an increase of 9.628%.This information is exact.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

The Cincinnati Indemnity Company - FEIN 31-1241230

Name of Company

Kelly Lindemuth, AINS, AIS, Filings Analyst III

Official - Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 07/15/2015

| (1) Coverage | (2) Annual Premium Volume (Illinois)* | (3) Percent Change (+ or -)** |
|---|---|-------------------------------------|
| 1. Automobile Liability Private Passenger Commercial | | |
| 2. Automobile Physical Damage Private Passenger Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other <u>CINCIPAK</u> Line of Insurance | <u>\$1,716,141</u> | <u>9.349%</u> |

Does filing only apply to certain territory (territories) or certain classes? If so, specify: Filing contains changes for all territories and most classes.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Revisions have been made to our existing Conversion Factors. We feel that we have achieved a rate level that is not excessive, inadequate or unfairly discriminatory. The overall net effect of these changes is an increase of 9.349%.

This information is exact.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

The Cincinnati Insurance Company - FEIN 31-0542366

Name of Company

Kelly Lindemuth, AINS, AIS, Filings Analyst III

Official - Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision
effective 01/01/15 New and 01/15/15 Renewal

| | (1) Coverage | (2) Annual Premium Volume (Illinois) * | (3) Percent Change (+or-) ** |
|-----|--|--|------------------------------------|
| 1. | Automobile Liability Private Passenger | | |
| | Commercial | | |
| 2. | Automobile Physical Damag Private Passenger | | |
| | Commercial | | |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | | |
| 10. | Extended Coverage | | |
| 11. | Inland Marine | | |
| 12. | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Other Package | \$7,001,572 | -0.15% |
| | Line of Insurance | | |

Does filing only apply to certain territory (territories) or certain
Classes? If so,
specify: No

Brief description of filing. (If filing follows rates of an advisory
Organization, specify
organization): Updating our Commercial Auto PMFs to coordinate with the
Commercial Auto revision.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new
rates.

Continental Western Insurance Company

Name of Company

John Thelen - Vice President, Secretary

Official - Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision
effective 01/01/15 New and 01/15/15 Renewal

| | (1) Coverage | (2) Annual Premium Volume (Illinois) * | (3) Percent Change (+or-) ** |
|-----|--|--|------------------------------------|
| 1. | Automobile Liability Private Passenger | | |
| | Commercial | | |
| 2. | Automobile Physical Damag Private Passenger | | |
| | Commercial | | |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | | |
| 10. | Extended Coverage | | |
| 11. | Inland Marine | | |
| 12. | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Other Package | \$511,499 | 0.05% |
| | Line of Insurance | | |

* Does filing only apply to certain territory (territories) or certain
Classes? If so,
specify: No

Brief description of filing. (If filing follows rates of an advisory
Organization, specify
organization): Updating our Commercial Auto PMFs to coordinate with the
Commercial Auto revision.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new
rates.

Firemen's Insurance Company of Washington D.C.

Name of Company

John Thelen - Vice President, Secretary

Official - Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision
effective 05/01/2015.

| | (1) Coverage | (2) Annual Premium Volume (Illinois) * | (3) Percent Change (+or-) ** |
|-----|--|--|------------------------------------|
| 1. | Automobile Liability Private Passenger | | |
| | Commercial | | |
| 2. | Automobile Physical Damag Private Passenger | | |
| | Commercial | | |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | | |
| 10. | Extended Coverage | | |
| 11. | Inland Marine | | |
| 12. | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Other <u>Businessowners</u> | \$3,378,463 | 0.213% |
| | Life of Insurance | | |

* Does filing only apply to certain territory (territories) or certain
Classes? If so,
specify: No

Brief description of filing. (If filing follows rates of an advisory
Organization, specify
organization): Equipment Breakdown Revision

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new
rates.

Frankenmuth Mutual Insurance Company

Name of Company

Shelly Hawes, Associate Senior

Official - Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision
effective 05/01/2015.

| | (1) Coverage | (2) Annual Premium Volume (Illinois) * | (3) Percent Change (+or-) ** |
|-----|--|--|------------------------------------|
| 1. | Automobile Liability Private Passenger | | |
| | Commercial | | |
| 2. | Automobile Physical Damag Private Passenger | | |
| | Commercial | | |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | | |
| 10. | Extended Coverage | | |
| 11. | Inland Marine | | |
| 12. | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Other Commercial Fire | \$205,327 | 0.108% |
| | Life of Insurance | | |

Does filing only apply to certain territory (territories) or certain
Classes? If so,
specify: No

Brief description of filing. (If filing follows rates of an advisory
Organization, specify
organization): Equipment Breakdown Revision

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new
rates.

Frankenmuth Mutual Insurance Company

Name of Company

Shelly Hawes, Senior Assooiate

Official – Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision
effective 04/01/2015.

| | (1) Coverage | (2) Annual Premium Volume (Illinois) * | (3) Percent Change (+or-) ** |
|-----|---|--|------------------------------------|
| 1. | Automobile Liability Private Passenger | | |
| | Commercial | | |
| 2. | Automobile Physical Damag Private Passenger | | |
| | Commercial | | |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | | |
| 10. | Extended Coverage | | |
| 11. | Inland Marine | | |
| 12. | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Other General Liability | \$61,161 | -1.5% |
| | Line of Insurance | | |

Does filing only apply to certain territory (territories) or certain Classes? If so, specify: N/A

Brief description of filing. (If filing follows rates of an advisory Organization, specify organization):

Adoption of ISO Loss Costs - GL-2014-IALL1

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

Harco National Insurance Company

Name of Company

Christy L. Moore, State Filing Analyst

Official - Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision
effective 04/01/2015.

| | (1) Coverage | (2) Annual Premium Volume (Illinois) * | (3) Percent Change (+or-) ** |
|-----|--|--|------------------------------------|
| 1. | Automobile Liability Private Passenger | | |
| | Commercial | | |
| 2. | Automobile Physical Damag Private Passenger | | |
| | Commercial | | |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | | |
| 10. | Extended Coverage | | |
| 11. | Inland Marine | | |
| 12. | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Other <u>Commercial Property</u> | \$63,545 | -2.3% |
| | Line of Insurance | | |

Does filing only apply to certain territory (territories) or certain
Classes? If so,
specify: N/A

Brief description of filing. (If filing follows rates of an advisory
Organization, specify
organization):

Adoption of ISO Loss Costs - CF-2014-RLA1

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new
rates.

Harco National Insurance Company

Name of Company

Christy L. Moore, State Filing Analyst

Official - Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision
effective 2/1/2015.

| | (1) Coverage | (2) Annual Premium Volume (Illinois) * | (3) Percent Change (+or-) ** |
|-----|--|--|------------------------------------|
| 1. | Automobile Liability Private Passenger | | |
| | Commercial | | |
| 2. | Automobile Physical Damag Private Passenger | | |
| | Commercial | | |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | | |
| 10. | Extended Coverage | | |
| 11. | Inland Marine | | |
| 12. | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Other <u>Other Liability - EPLI</u> | 1,505,255 | 8.5% |
| | Line of Insurance | | |

Does filing only apply to certain territory (territories) or certain
Classes? If so,
specify: No

Brief description of filing. (If filing follows rates of an advisory
Organization, specify
organization):

Adoption of Illinois Employment-Related Practices Liability Loss

Costs and Rules as referenced in ISO reference filings EP-2014-RLA1 and EP-2014-REPRU.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new
rates.

National Interstate Insurance Company

Name of Company

Casey Monczewski - Compliance Specialist

Official - Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision
effective 01/01/15 New and 01/15/15 Renewal

| | (1) Coverage | (2) Annual Premium Volume (Illinois) * | (3) Percent Change (+or-) ** |
|-----|--|--|------------------------------------|
| 1. | Automobile Liability Private Passenger | | |
| | Commercial | | |
| 2. | Automobile Physical Damag Private Passenger | | |
| | Commercial | | |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | | |
| 10. | Extended Coverage | | |
| 11. | Inland Marine | | |
| 12. | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Other Package | \$384,141 | 0.36% |
| | Line of Insurance | | |

Does filing only apply to certain territory (territories) or certain
Classes? If so, .
specify: No

Brief description of filing. (If filing follows rates of an advisory
Organization, specify
organization): Updating our Commercial Auto PMFs to coordinate with the
Commercial Auto revision.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new
rates.

Union Insurance Company

Name of Company

John Thelen - Vice President, Secretary

Official - Title